

Appln. No.: 09/964,178
Amendment Dated March 23, 2004
Reply to Office Action of December 29, 2003

TUNA-566US



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No: 09/964,178
Applicant: Robert Raffa et al.
Filed: September 25, 2001
Title: ANALGESIC AND GLUCOSAMINE COMPOSITIONS
TC/A.U.: 1623
Examiner: Leigh C. Maier
Confirmation No.: 9598
Docket No.: TUN-566US

AMENDMENT UNDER 37 C.F.R. § 1.116

Expedited Procedure

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Responsive to the Office Action dated December 29, 2003, please amend the above-identified application as follows:

- ☒ **Amendments to the Specification** begin on page 2 of this paper.
- ☒ **Amendments to the Claims** are reflected in the listing of claims which begins on page 3 of this paper.
- ☐ **Amendments to the Drawings** begin on page _____ of this paper and include an attached replacement sheet(s).
- ☐ **Amendments to the Abstract** are on page _____ of this paper. A clean version of the Abstract is on page _____ of this paper.
- ☒ **Remarks/Arguments** begin on page 5 of this paper.



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PTO/SB/21 (02-04) (AW 02/2004)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 12

Application Number	09/964,178
Filing Date	September 25, 2001
First Named Inventor	Robert Raffa
Art Unit	1623
Examiner Name	Leigh C. Maier
Attorney Docket No.	TUNA-566US

ENCLOSURES (Check all that apply)

- ☐ Fee Transmittal Form
- ☐ Fee Attached
- ☒ Amendment/Reply
 - ☒ After Final
 - ☐ Affidavits/Declaration(s)

- ☐ Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Document(s)

- ☐ Response to Missing Parts/
Incomplete Application
- ☐ Response to Missing Parts under
37 CFR 1.52 or 1.53

- ☐ Drawing(s)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a
Provisional Application
- ☐ Power of Attorney, Revocation,
Change of Correspondence
Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) _____

- ☐ After Allowance Communication
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- ☐ Appeal Communication to Board
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(Appeal Notice, Brief, Reply
Brief)
- ☐ Proprietary Information
- ☐ Status Letter
- ☐ Other Enclosure(s) (please
identify below): Return Postcard

Remarks:

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual Name	Robert L. Anderson	Registration No. (Attorney/Agent)	25,771
Signature	<i>R L Anderson</i>		
Date	March 23, 2004		

CERTIFICATE OF TRANSMISSION / MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: March 23, 2004

Typed or printed name	Patricia Boccella		
Signature	<i>Patricia C. Boccella</i>	Date	March 23, 2004

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